

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

106931-1

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	54	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	51 minus 20 =	31
INDEPENDENT CLAIMS	15 minus 2 =	12
MULTIPLE DEPENDENT CLAIM PRESENT		1

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	FOR	NUMBER	MINUS		
Independent	22	MINUS	10	32	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	\$19.00	OR	\$19.00
X510-		OR	X510- \$102
X43-		OR	X43- \$37
X145-		OR	X145- \$200
TOTAL		OR	TOTAL \$104

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X510-		OR	X510-
X43-		OR	X43- \$200
X145-		OR	X145- \$200
TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	FOR	NUMBER	MINUS		
Independent	22	MINUS	10	32	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X510-		OR	X510-
X43-		OR	X43- \$200
X145-		OR	X145- \$200
TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	FOR	NUMBER	MINUS		
Independent	22	MINUS	10	32	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X510-		OR	X510-
X43-		OR	X43- \$200
X145-		OR	X145- \$200
TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE

* If entry in column 1 is less than the entry in column 2, enter "0" in column 3.

** PAYMENT NUMBER PREVIOUSLY PAID FOR IN THIS SPACE IS THE NUMBER OF THE PAYMENT NUMBER PREVIOUSLY PAID FOR IN THE SPACE IN THE FORM FOR THE PREVIOUS AMENDMENT.

The "Highest Number Previously Paid For" term is the highest number listed in the previous form for the same claim.